Town of Clifton Commercial Parking Tabulation

Property Name:	
Property Owner's Name:	
Owner's Contact Information:	
Date:	
Building Total Gross Floor Area:	

SUITE#	TENANT NAME	NET FLOOR AREA	USE (Restaurant/Office/Retail/Other Commercial Use)	NUMBER OF EMPLOYEES	NUMBER OF CUSTOMER SEATS (For Restaurant Use Only)	PARKING SPACES REQUIRED	DATE OF APPROVAL OF USE PERMIT

rking Spaces on the Property:	otal # of Platted Parking Spaces on the Property:			
mit Allocated Parking Spaces:	Total # of Use Permit Allocated Parking Spaces:			
-				
Total # of Loading Spaces:				